Application Data Sheet

Application Information

Application number::

Filing Date:: 11/09/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Multiplexed Electrode Array Extension

Attorney Docket Number:: 11738.00024

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: NO

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

Applicant Information

City of mailing address::

Inventor Applicant Authority Type:: **USA** Primary Citizenship Country:: **Full Capacity** Status:: Paul Given Name:: Middle Name:: Stypulkowski Family Name:: Name Suffix:: N. Oaks City of Residence:: Minnesota State or Province of Residence:: USA Country of Residence:: 61 Deer Hills Ct. Street of mailing address:: N. Oaks City of mailing address:: State or Province of mailing address:: Minnesota **USA** Country of mailing address:: Postal or Zip Code of mailing address:: 55127 Inventor Applicant Authority Type:: Primary Citizenship Country:: **Full Capacity** Status:: Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence:: Country of Residence:: Street of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Status::

Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number::

22908

Representative Information

Representative Customer Number::

22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::

Medtronic, Inc.

Street of mailing address::

710 Medtronic Parkway NE

City of mailing address::

Minneapolis

State or Province of mailing address::

Minnesota

Country of mailing address::

USA

Postal or Zip Code of mailing address::

55432-5604